



## Supplemental Application Data Sheet

### Application Information

Application Number::	10/062,831
Filing Date::	02/05/02
Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Sequence submission?::	Paper
Computer Readable Form (CRF)?::	No
Title::	<del>32 Human Secreted Proteins</del> Secreted Protein HEMCM42
Attorney Docket Number::	PZ006G13AP1C1D1
Total Drawing Sheets::	None
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### Applicant Information

Applicant Authority Type::	Applicant
Primary Citizenship Country of mailing address::	US
Status::	Full Capacity
Given Name::	Steven
Middle Name::	M.
Family Name::	Ruben
City of Residence::	Olney
State or Prov. of Residence of mailing address::	MD
Country of Residence::	US
Street of mailing address::	18528 Heritage Hills Drive
City of mailing address::	Olney



State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20832
Applicant Authority Type::	Applicant
Primary Citizenship Country of mailing address::	US
Status::	Full Capacity
Given Name::	Craig
Middle Name::	A.
Family Name::	Rosen
City of Residence::	Laytonsville
State or Prov. of Residence of mailing address::	MD
Country of Residence::	US
Street of mailing address::	22400 Rolling Hill Lane
City of mailing address::	Laytonsville
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20882
<del>Applicant Authority Type::</del>	<del>Applicant</del>
<del>Primary Citizenship Country of mailing address::</del>	<del>US</del>
<del>Status::</del>	<del>Full Capacity</del>
<del>Given Name::</del>	<del>Kenneth</del>
<del>Middle Name::</del>	<del>G.</del>
<del>Family Name::</del>	<del>Carter</del>
<del>City of Residence::</del>	<del>North Potomac</del>
<del>State or Prov. of Residence of mailing address::</del>	<del>MD</del>
<del>Country of Residence::</del>	<del>US</del>

Street of mailing address::	11600 Brandy Hall Lane
City of mailing address::	North Potomac
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20878

Applicant Authority Type::	Applicant
Primary Citizenship Country of mailing address::	US
Status::	Full Capacity
Given Name::	Patrick
Middle Name::	J.
Family Name::	Dillon
City of Residence::	Carlsbad
State or Prov. of Residence of mailing address::	CA
Country of Residence::	US
Street of mailing address::	1055 Snipe Court
City of mailing address::	Carlsbad
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	92009

Applicant Authority Type::	Applicant
Primary Citizenship Country of mailing address::	US
Status::	Full Capacity
Given Name::	Gregory
Middle Name::	A.
Family Name::	Endress
City of Residence::	Florence

State or Prov. of Residence of mailing address::	MA
Country of Residence::	US
Street of mailing address::	184 Federal Street
City of mailing address::	Florence
State or Province of mailing address::	MA
Country of mailing address::	US
Postal or Zip Code of mailing address::	01062

<del>Applicant Authority Type::</del>	<del>Applicant</del>
<del>Primary Citizenship Country of mailing address::</del>	<del>US</del>
<del>Status::</del>	<del>Full Capacity</del>
<del>Given Name::</del>	<del>Guo-Liang</del>
<del>Family Name::</del>	<del>Yu</del>
<del>City of Residence::</del>	<del>Berkeley</del>
<del>State or Prov. of Residence of mailing address::</del>	<del>CA</del>
<del>Country of Residence::</del>	<del>US</del>
<del>Street of mailing address::</del>	<del>242 Gravatt Drive</del>
<del>City of mailing address::</del>	<del>Berkeley</del>
<del>State or Province of mailing address::</del>	<del>CA</del>
<del>Country of mailing address::</del>	<del>US</del>
<del>Postal or Zip Code of mailing address::</del>	<del>94705</del>

<del>Applicant Authority Type::</del>	<del>Applicant</del>
<del>Primary Citizenship Country of mailing address::</del>	<del>China</del>
<del>Status::</del>	<del>Full Capacity</del>
<del>Given Name::</del>	<del>Jian</del>
<del>Family Name::</del>	<del>Ni</del>
<del>City of Residence::</del>	<del>Germantown</del>

State or Prov. of Residence of mailing address::	MD
Country of Residence::	US
Street of mailing address::	17815 Fair Lady Way
City of mailing address::	Germantown
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20874

Applicant Authority Type::	Applicant
Primary Citizenship Country of mailing address::	US
Status::	Full Capacity
Given Name::	Ping
Family Name::	Feng
City of Residence::	Gaithersburg
State or Prov. of Residence of mailing address::	MD
Country of Residence::	US
Street of mailing address::	4 Relda Court
City of mailing address::	Gaithersburg
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20878

### **Correspondence Information**

Correspondence Customer Number::	22195
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### **Representative Information**

Representative Customer Number::	22195
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### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/690,454	10/18/00
09/690,454	Continuation of	09/189,144	11/10/98
09/189,144	Continuation-in-part of	PCT/US98/10868	05/28/98
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/056,293	08/29/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/056,296	08/29/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/056,250	08/29/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/048,356	05/30/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/048,101	05/30/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/050,935	05/30/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/048,190	05/30/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/048,093	05/30/97
09/189,144	<u>An application claiming the benefit under 35 USC 119(e)</u>	60/044,039	05/30/97

### Assignee Information

Assignee name::	Human Genome Sciences, Inc.
Street of mailing address::	<u>14200 Shady Grove Road</u>

City of mailing address::	Rockville
State or Province of mailing address::	MD
Country of mailing address::	USA
Postal or Zip Code of mailing address::	20850